

07/13/01  
J4430 U.S. PTO

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Practitioner's Docket No. 210\_234

PATENT

NEW APPLICATION TRANSMITTAL

Box Patent Application  
Assistant Commissioner for Patents  
Washington D.C. 20231

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I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 addressed to the **Box Patent Application, Assistant Commissioner for Patents, Washington D.C. 20231** on July 13, 2001.

*Cheryl M. Nichols*  
Cheryl M. Nichols

Transmitted herewith for filing is the patent application of:

Inventors: Michael W. Austin and Christian C. Herbeck

For: HINGED PANEL FOR AIR HANDLER CABINET

Enclosed are:

1. Papers enclosed that are required for filing date under 37 CFR 1.53(b) (Regular) are:

- 4 Page(s) of Specification
- 3 Page(s) of Claims
- 1 Page(s) of Abstract
- 3 Sheets of Drawings (Figs. 1-5)

2. Other Papers Enclosed

- ☐ A Preliminary Amendment
- ☒ An unsigned combined Declaration and Power of Attorney
- ☐ A Claim for Priority and a certified copy of filed in will follow under separate cover.
- ☐ An Information Disclosure Statement
- ☐ PTO Form-1449
- ☐ An Assignment Transmittal and Assignment of the invention to Carrier Corporation
- ☐ Request for Non-Publication

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3. ☒ The filing fee has been calculated as shown below:

For	No. Filed	No. Extra	Rate	Fee
Basic Fee				\$710.00
Total Claims (20)	16	0	x \$18.00	
Indep Claims (3)	2	0	x \$80.00	
<input type="checkbox"/> Multiple Dependent Claims Presented			x \$270.00	
If the difference in Col. 1 is less than zero, enter "0" in Col. 2			Total	\$710.00


- ☐ A check in the amount of \_\_\_\_\_ is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-0835 (Order No. 1623).
- ☒ Any additional filing fees required under 37 CFR 1.16.
- ☐ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

WALL MARJAMA & BILINSKI

Date: July 13, 2001

By: \_\_\_\_\_

  
Christopher R. Pastel  
Reg. No. 37,694

CRP/cmn  
101 South Salina Street, Suite 400  
Syracuse, NY 13202  
Telephone: (315) 425-9000  
Fax: (315) 425-9114